16 officers will no longer have to work in a doublewide trailer, but will have a fully functional station to better serve the community.

Along with his commitment to the department, he has spent numerous hours in the schools teaching children the importance of safety. He established a first aid patrol for students, teaching them the fundamental skills that can save lives.

Aside from being a hardworking and dedicated police officer, Chief Klienkauf found time in his day to volunteer as a firefighter in his hometown. He also spent years serving on the local first aid squad. He remains an active member of the New Jersey State Association of Police Chiefs and the Middlesex County Association of Chiefs of Police.

As an inspiration to police officers in his department and the state of New Jersey, Chief Klienkauf has contributed significantly to the life of his community. He has earned our heartfelt appreciation for his efforts.

RECOGNIZING WALTER J. STYER

HON. JIM GERLACH

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Friday, November 21, 2003

Mr. GERLACH. Mr. Speaker, I rise today to recognize Walter J. Styer, retiring Supervisor of Upper Uwchlan Township, Chester County, Pennsylvania, and commend him for his lifelong service to our community.

When Walter Stver first took office as Supervisor, Upper Uwchlan Township was a rural farming community with only 1,200 residents. Today, after three decades of continuing growth and development, there are now 7,000. As the community has grown, so has the job of supervisor. Mr. Styer's primary responsibility during his time in office has been to make sure that Upper Uwchlan grew responsibly and that the needs and desires of its citizens were continually met. In the beginning, his meetings would take 20 min, and would revolve around paying the bills and reading the road report. In recent years, it has not been uncommon to have multiple meetings in a single week for several hours at a time. His participation in the supervising of a rapidly growing community is a true testament to his commitment and his willingness to adapt to the increasing demands of the position. Over the years, as more and more time was required as supervisor, Walter Styer still found time to run his own businesses, remain active in his church and raise four children. What has kept him going all these years was his desire to see all of his projects and undertakings to a successful conclusion—a testament to his character and drive. His tremendous leadership and experience as been an enormous asset to Upper Uwchlan Township and has allowed it to grow responsibly and successfully for all these years.

Mr. Speaker. I ask that my colleagues join me today in recognizing and honoring Walter J. Styer for his lifetime of exemplary citizenship and civil works to make Upper Uwchlan Township a better place to live.

PAYING TRIBUTE TO JUNE VALENTINE

HON. SCOTT McINNIS

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES Friday, November 21, 2003

Mr. McINNIS. Mr. Speaker, it is my honor to rise and pay tribute to a remarkable woman from my district. The Southern Colorado Livestock Association recently named June Valentine Stockman of the Year. June is the first woman to receive this honor in the history of the association, and it is my privilege to call her contributions to the attention of this body of Congress and our nation today.

June has been a rancher in Las Animas County her entire life. As a rancher, June is passionate and knowledgeable. In the ranching industry, June has transcended gender stereotypes and proven herself as able as any rancher in Colorado.

June is also well known for her contributions to the community. She is an avid historian who shares her knowledge of the county's history with her many friends and neighbors. In addition, June is also involved in local government and has held many offices in service of the community.

Mr. Speaker, it is my honor to rise and pay tribute to June Valentine before this body of Congress and our nation today. June is an amazing rancher, historian, public servant and friend. Her contributions set a fine example for all Americans. Congratulations, June, on a well deserved award.

PERSONAL EXPLANATION

HON. DANNY K. DAVIS

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES Friday, November 21, 2003

Mr. DAVIS of Illinois. Mr. Speaker I was unavoidably detained in my district. Had I been present, I would have voted yea on the following roll call votes:

Roll Call 620 (S.J. Res. 22), Recognizing the Agricultural Research Service of the Department of Agriculture for 50 years of outstanding service to the Nation through agricultural research:

Roll Call 621 (S.J. Res. 18), Commending the Inspectors General for their efforts to prevent and detect waste, fraud, abuse, and mismanagement, and to promote economy, efficiency, and effectiveness in the Federal Government during the past 25 years;

Roll Call 622 (H. Con. Res. 299), Honoring Mr. Sargent Shriver for his dedication and service to the United States of America, for his service in the United States Navy, and for his lifetime of work as an ambassador for the poor and powerless citizens of the United States of America, and for other purposes;

Roll Call 623 Motion—On Hour of Meeting.

HEALTH EMPOWERMENT ZONE

HON. DONNA M. CHRISTENSEN

OF THE VIRGIN ISLANDS IN THE HOUSE OF REPRESENTATIVES

Friday, November 21, 2003

Mrs. CHRISTENSEN. Mr. Speaker, on March 20, 2002, the Institute of Medicine

(IOM) released a landmark report entitled: Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care. Among other key findings, the report documented that minorities in the United States receive fewer lifeprolonging cardiac medications and surgeries, are less likely to receive dialysis and kidney transplants, and are less likely to receive adequate treatment for pain. Its first and most telling finding States that "racial and ethnic disparities in healthcare exist and, because they are associated with worse outcomes in many cases, are unacceptable." The reasons for these disparities in treatment are wide and varied, and include, but are not limited to: healthcare provider prejudice or bias, the implicit nature of stereotypes, and broader historic and contemporary social and economic inequality. The report included a series of recommendations and interventions for policy changes to eliminate these unacceptable disparities.

Whether it is the recently released IOM report on Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care, the Commonwealth Fund's report Diverse Communities, Common Concerns: Assessing Health Care Quality for Minority Americans or a recent report by Physicians for Human Rights (2003) found that many minority groups receive lower quality evaluation and treatment than white Americans for a wide range of medical conditions, even when each has health insurance.

We are continually reminded that throughout the history of our great Nation, our people have been denied access to the best that medical science has had to offer—often relegated to hospitals with outdated equipment and served by African-American health care providers who, although as capable, intelligent, and gifted as their white counterparts, often could not obtain equivalent training because of racist practices such as segregation.

This segregated health system was largely responsible for the health inequities that existed during the early and middle part of this century. Indeed, in 1951 Dr. W. Montague Cobb, editor of the Journal of the National Medical Association, stated "For nearly fifty years the retarded health status of our Negro population has been common knowledge and the object of sporadic corrective effort". With the Civil Rights came an acknowledgment came greater equality in many aspects of life for African-Americans, including greater access to quality health care.

As an effort to extend such acknowledgment I am proud to introduce the Health Empowerment Zone Act of 2003. This act directs the Secretary of Health and Human Services with the Administrator of the Health Resources and Services administration and the Directors of the Office of Minority Health, of the Office of Community Services and National Center for Minority Health and Health Disparities to establish health empowerment zone programs in communities that disproportionately experience disparities in health status and health care, and for other purposes.

To be eligible the communities must demonstrate that they experience disproportionate disparities in health status and health care, set forth a strategic plan and create a partnership, with individuals, businesses, schools, minoritie health associations, nonprofit organizations, community-based organizations, hospitals, health care clinics, and foundations.